2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002927

Entity Name: COASTAL INTERNATIONAL SECURITY, INC.

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	MINAL ROAD			•	
Current Mailing Address:			New Mailing Address:		
8198 TERN SUITE 204 LORTON, Y	MINAL ROAD VA 22079				
FEI Number:	57-0940973	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:	
TASSONE, JAMES A 1761 S.W. 109TH TERRACE DAVIE, FL 33324 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,					
in the State					
SIGNATUR					
	Electroni	ic Signature of Registered Agent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () WRENN, CURTI 8198 TERMINAL LORTON, VA 22	. ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MORRIS, JOHN	ROAD, SUITE 204	Title: Name: Address: City-St-Zip:	T (X) Change () Addition MORRIS, JOHN S 8198 TERMINAL ROAD, SUITE 204 LORTON, VA 22079	
Title: Name: Address: City-St-Zip:	T () KHALSA, SIRI K 7 INFINITY LOO ESPANOLA, NM	P	Title: Name: Address: City-St-Zip:	S (X) Change () Addition MATEER, MICHAEL E 509 PAINTED DUCK CT MYRTLE BEACH, SC 29588	
Title: Name: Address: City-St-Zip:	D () KHALSA, DAYA 7 INFINITY LOO ESPANOLA, NM	S P	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MATEER, MICHA 509 PAINTED DI MYRTLE BEACH	UCK CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition WRENN, CURTIS L JR 8198 TERMINAL ROAD, SUITE 204 LORTON, VA 22079	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CURTIS L WRENN, JR P 02/02/2009